


2007 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90102 035 ***150.00

DOCUMENT # P05000154861	
1. Entity Name STELLA REALTY GROUP, INC.	

Principal Place of Business 200 SE 6TH STREET STE 603 FT. LAUDERDALE FL 33301	Mailing Address 200 SE 6TH STREET STE 603 FT. LAUDERDALE FL 33301
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2. Principal Place of Business - No P.O. Box # THE STELLA LAW FIRM, P.A. 404 SE 14th Court Ft. Lauderdale, FL 33316	3. Mailing Address THE STELLA LAW FIRM, P.A. 404 SE 14th Court Ft. Lauderdale, FL 33316
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1st MOORE CR2E034 (10/06)

4. FEI Number 20-3973501	Applied For <input type="checkbox"/> Not Applicable
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STELLA REALTY GROUP, Inc. 404 SE 14th Court Ft. Lauderdale, FL 33316	STELLA REALTY GROUP, Inc. 404 SE 14th Court Ft. Lauderdale, FL 33316
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Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
7. Name and Address of New Registered Agent Name: Charles C. Stella, Esq. Address: THE STELLA LAW FIRM, P.A. 404 SE 14th Court Ft. Lauderdale, FL 33316 City: FL Zip Code: 33316	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Charles C. Stella* C. CRAIG STELLA - Pres. & Registered Agent
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS STELLA, CHARLES C ESQ. 200 SE 6TH STREET, SUITE 603 FORT LAUDERDALE FL 33301 <i>404 SE 14th Ct 33316</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STELLA REALTY GROUP, Inc. 404 SE 14th Court Ft. Lauderdale, FL 33316	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a power like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/07 954-7793800
Date Daytime Phone #